PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | 10/5/9679 | | | |
|--|--|---|-----------------|---|-------------------|------------------|---------------------|--|----|-------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL EN | TITY | OR | OTHER SMALL | |
| U.S | . NATIONAL | STAGE FEES | | | | | RATE | FEE | 1 | RATE | FEE |
| BASIC FEE | | | | | | | BASIC FEE | | OR | BASIC FEE | 311 |
| EXAMINATION FEE | | | | | | | EXAM. FEE | | 1 | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | SEARCH FEE | | 1 | SEARCH FEE | Uni |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = . | X \$ 125 = | | 1 | X \$ 250 = | 70 0 |
| TOTAL CHARGEABLE CLAIMS | | | 12 minus 20 = * | | * | | X \$ 25 = | <u> </u> | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | / minus 3 = | | * | ~ | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | L/ | | | | + \$ 180 = | | OR | + \$ 360 = | _ |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | an |
| | | • | | | | | | L | 1 | | 700 |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colum | nn 21 | (Column 3) | | | | , == , | |
| | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID F | ST SER USLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | · | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. | |
| | | | | | • | | | | | | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".